

FAMILY CAMP

REGISTRATION FORM



FAMILY INFORMATION

Name: _____ Cabin Request: Half Full Anticipated Number of Guests: _____

Cabin Number Preference: Family Camp Memorial Day Labor Day Fall Family Camp

Contact Information Same as this year: Yes No

Address: _____

Email Address: _____

Phone Number: _____

Special Requests, Allergies, etc

CABIN CHARGES

Cabin Charges	Price Per Side	Additional People after 8		Base Fees	
Cabin 4-12 and Boat House	\$1550	Age 9+	\$190	Additional People	
Cabins 1, 2, 3 and 16 & Hide-A-Way	\$1650	Ages 4-8	\$135	\$250/Security Deposit Per Side	
Seniors Per Person (Hostel Style)	\$170	Infant/Toddler	FREE	TOTAL DUE	
OFFICE USE ONLY: CABIN ASSIGNED _____				DUE TODAY (Security Deposit and \$250 per Cabin Side Deposit)	
				BALANCE DUE	
				30 days before weekend	

PAYMENT INFORMATION

CREDIT CARD INFORMATION: _____ EXP DATE: _____ SEC CODE: _____ SIGNATURE: _____

NAME ON CARD: _____

PARTICIPATION AGREEMENTS

I realize that even after reasonable precautions are taken some activities such as but not limited to swimming, hiking, horse riding, boating, and climbing may involve inherent risks for which Camp Jewell YMCA cannot be held responsible. I understand that the \$250 deposit due with this registration is non-refundable and non-transferable. Your deposit secures your cabin for the chosen family camp, in addition a \$250 security deposit is required that will be refunded after the camp is over to the card on file, or can be used towards the following years deposit. Any additional damages will be charged to your credit card on file. Camp Jewell is an alcohol free facility, any guests found to be drinking alcohol will be asked to leave. I understand that my registration WILL be canceled if payment in full is not received within 30 days prior to the start of family camp and I will be billed for the final number of guests on file 30 days prior to camp even if I bring fewer guests. I authorize the YMCA to have and use the name, photographs, slides, and video of the person(s) named on this registration form in camp promotional materials. I understand that while every effort is made to honor cabin and family requests there is no guarantee.

Family Representative Signature: _____ Date: _____

9. PAYMENTS TO CAMP JEWELL MAY ONLY BE MADE BY ONE PARTICIPANT. Please decide who in your group will be reserving the cabin and making payments. Family name responsible for payment: _____